

SCHEDULE

	FOR TOTAL DISABILITY DUE TO: INJURY	SICKNESS
MONTHLY BENEFIT	\$1,375.00	\$1,375.00
ELIMINATION PERIOD	90 DAYS	90 DAYS
MAXIMUM BENEFIT PERIOD *		
FOR A PERIOD OF CONTINUOUS TOTAL DISABILITY COMMENCING:		
-BEFORE THE ANNIVERSARY DATE OF THIS POLICY NEXT FOLLOWING YOUR 45TH BIRTHDAY	LIFETIME	LIFETIME
-ON OR AFTER THE ANNIVERSARY DATE OF THIS POLICY NEXT FOLLOWING YOUR 45TH BIRTHDAY AND BEFORE THE ANNIVERSARY DATE OF THIS POLICY NEXT FOLLOWING YOUR 63RD BIRTHDAY	AGE 65	AGE 65
-ON OR AFTER THE ANNIVERSARY DATE OF THIS POLICY NEXT FOLLOWING YOUR 63RD BIRTHDAY	24 MONTHS	24 MONTHS

*UNLESS THE MAXIMUM BENEFIT PERIOD IS 'LIFETIME', THE MAXIMUM BENEFIT PERIOD FOR ANY PERIOD OF TOTAL DISABILITY BEGINNING PRIOR TO THE ANNIVERSARY DATE OF THIS POLICY NEXT FOLLOWING YOUR 63RD BIRTHDAY WILL NOT EXTEND BEYOND THE ANNIVERSARY DATE OF THIS POLICY NEXT FOLLOWING YOUR 65TH BIRTHDAY.

ADDITIONAL BENEFIT PROVISIONS INCLUDED, IF ANY:

WJ1527A	SOCIAL SECURITY SUPPLEMENT BENEFIT	\$225.00
WJ1817	RESIDUAL DISABILITY	
W1756	COST OF LIVING INCREASE	

STANDEN

INSURED CHRISTOPHER L KEARNEY

POLICY NUMBER H0-0538069

EFFECTIVE DATE MAY 28, 1991

TERM: 12 MONTH(S)

**PREMIUM FOR EACH TERM UNTIL
AGE 65** \$709.26**

****NOTE:** RENEWAL OF COVERAGE BEYOND AGE 65 MAY REQUIRE AN INCREASE IN THE RENEWAL PREMIUM AFTER AGE 65

WJ1413A